

OPINION

Where's the urgency in Canada's vaccine rollout?

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"Israel is vaccinating so fast it's running out of vaccine," reads the headline in Monday's Washington Post.

It's enough to make a grown man weep, at least in Canada, where we are vaccinating so slowly that more than two-thirds of our modest vaccine stocks are sitting unused.

Since it began its vaccine rollout on Dec. 20, Israel has administered as many as 150,000 doses daily. Canada began vaccinating even earlier, on Dec. 14, but since then has immunized only 120,000 people – yes, fewer than Israel does in a day. On Monday morning, we had 300,000 doses languishing in freezers, like old bags of peas.

Both countries are prioritizing health care workers and elders, but only Israel is doing so with a sense of urgency. At least two million of its nine million residents will be immunized by the end of January.

The plan in this country – at least on paper – is to inoculate four million people by the end of March, or roughly 11 per cent of citizens. Israel has already surpassed that percentage in 10 days.

So what explains the shocking disparity in responses?

First of all, Israel got a lot of doses quickly. It did so by signing some contracts early, and by paying premiums to other vaccine manufacturers to ensure its delivery date would be moved up.

Canada's vaccine deliveries have trickled in. The federal government was a laggard on procurement, then tried to make up for it by signing contracts with seven manufacturers for almost 400 million doses. We don't know what Canada paid for vaccines, other than the total bill will exceed \$1-billion.

Where Israel has excelled is logistics.

In a country perpetually on alert, mobilization is second nature, so its clinics were set up with lightning speed, and the army's medical corps played a key role.

Just as importantly, Israel has a universal health care system, administered centrally – and excellent electronic health records, which it used both to notify citizens that vaccines were available and to track who has received them.

A tiny, densely populated country, it also had some practical advantages over Canada and its sprawling geography.

The big difference, though, is in mindset.

Israel, eager to be done with the pandemic, made vaccinating – not just ordering vaccines – its top priority.

There is a political element, too. Prime Minister Benjamin Netanyahu sees a successful vaccination campaign as a way of bolstering his popularity. (Another political element is that Israel is not vaccinating Palestinians in the West Bank and Gaza, but that is a human-rights issue, not health logistics.)

In Canada, we have military generals in charge of our rollout, but they don't seem to have much sway.

We rushed to get the first vaccines into health workers and elders because that made for good photo opportunities. But getting the subsequent vaccines to more people seems to have been treated with shocking lassitude.

There is nothing more symbolic of this disdain than the fact that Canadian politicians were sunning themselves in places such as Hawaii, St. Barts and Barbados while vaccines languished in freezers back home. What's unfortunate, however, is that the antics of scofflaw politicians have generated far more media attention than the slow vaccine rollout that will ultimately cost lives.

Paradoxically, the Atlantic provinces, which arguably need it least, have done the best job of vaccination, continuing their no-nonsense pandemic response. Similarly, many Indigenous communities seem more organized than provincial governments with far more resources.

In Ontario and Quebec, where new coronavirus cases and COVID-19 hospitalizations have continued to rise steadily in recent weeks, vaccine clinics were closed or scaled back during the holidays.

Elders in institutional care have been once again grossly neglected, especially in Ontario. The argument that it's technically difficult to deliver the vaccines to care homes doesn't hold water, because it's being done in numerous countries and even in neighbouring Quebec.

Health workers in particular are outraged by the slow vaccine rollout – and rightfully so.

If we're going to treat pandemic patients 24/7, we should be doing pandemic prevention in the form of vaccination 24/7 as well.

Yet, public health, which usually oversees mass vaccine campaigns, has been inexplicably sidelined; so too have pharmacists, paramedics and family doctors.

Going forward, we need all hands on deck.

The pandemic has been challenging, but the next couple of months are going to be the hardest yet. We desperately need some hope – and the best way to deliver hope right now is by getting shots into people's arms.

Editor's note: This article has been updated to clarify that it is Palestinians in the West Bank and Gaza not currently being vaccinated.

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